

POLICY AND PROCEDURES

NUMBER: 1308 SUBJECT: Contagious Diseases/Epidemic

ACA STANDARDS: 4-ALDF-4C-14

DIRECTOR: Herbert Bernsen

EFFECTIVE DATE: 9/97 REVISION DATE: 9/06, 11/13

I. POLICY

The St. Louis County Department of Justice Services and the St. Louis County Department of Health will confirm all reports of contagious diseases contracted by inmates and will take the necessary actions to contain and prevent the spread of the disease.

II. RESPONSIBILITIES

All St. Louis County Department of Justice Services' Corrections staff and Corrections Medicine staff are responsible for the following procedures.

III. DEFINITIONS

Epidemic: Usually defined as a disease that appears as new in a given human population, during a given period of time, and at a rate that substantially exceeds what is "expected" based on recent experience. An epidemic is defined by the organism involved in the disease process.

Negative Pressure Room: Prevents the escape of droplet nuclei into the buildings ventilation system. The air in the room is exhausted to the outside. Both doors and chuckholes, when not in use for transportation of person or items, must be closed at all times so the negative pressure can be maintained.

Precaution Types:

Standard: These are to be used for all inmates regardless of whether

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they are known to be infected with potentially contagious microorganisms or not. This includes proper hand washing, personal protective equipment (gloves, mask, gown, face shield or goggles), proper disposal of sharps, following proper protocols for laundry and housekeeping, and housing those inmates who cannot or will not maintain appropriate hygiene in single cell units.]

Transmission-Based Precautions

Airborne Precautions: Should be used for those inmates who are known or suspected to have active TB, measles, chickenpox or disseminated zoster. This type of precaution requires isolation in a private room with negative air pressure. All persons entering the room must wear a respirator that meets the NIOSN N-95 standard. Movement of the inmate from the room should be minimized and the inmate must wear a surgical mask when out of the room.

Droplet Precautions: This is intended to decrease the likelihood of transmission of organism that can be carried in droplet form. These can be created when a person talks, coughs, sings, or sneezes. These droplets do not remain suspended in the air and usually will travel no more than three (3) feet. Some illnesses that require droplet precautions include meningitis and epiglottitis due to <u>Haemophilus influenza</u>, infections caused by <u>Neisseria meningitides</u>, influenza and mycoplasma pneumonia. These inmates should be placed in a single cell or housed with other inmates who are infected with the same organism. Staff should wear a respirator when they are within three (3) feet of the infected person. If the inmate must leave the cell a surgical mask must be worn.

Contact Precaution: Should be used for persons known or suspected to be infected with organisms that commonly cause disease and can be transmitted by direct or indirect contact. These organisms can be acquired by direct contact with an infected person or indirectly by contact with inanimate objects. Disease examples include: Clostridium difficile, herpes simplex virus, hepatitis A virus, Varicella zoster virus, methicillin resistant Staphylococcus aureus (MRSA, Vancomycin-resistant enterococcus, lice and scabies. Staff members should wear gloves when entering an infected person's room and remove gloves and wash hands when leaving. Gowns should be worn while in the room and removed when leaving. Face shields and eye protection should be worn during procedures that are likely to cause splashing of body fluids. Personal care items should remain in the room and not be reused on other persons unless they are disinfected.

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IV. PROCEDURES

- A. Isolation of an Inmate with a Contagious Disease
 - 1. An inmate suspected of being infected with a communicable disease, as defined by the State of Missouri, will be reassigned to an isolation cell or will be isolated and receive the appropriate laboratory testing, until the inmate is proven to be disease free.
 - 2. Portions of this record are closed pursuant to Section 610.021 (19) (21) RSMo and Section 114.020 (18) (20) SLCRO because public disclosure of such portions would threaten public safety by compromising the safe and secure operation of the Jail, and the public interest in nondisclosure outweighs the public interest in disclosure of the portions of such records., of formal admission to a Justice Center housing unit, the inmate will receive laboratory testing for the following:
 - **a.** HIV (Human Immunodeficiency Virus) Antibody Testing.
 - **b.** PPD (Tuberculosis Test); which is examined by the Corrections Medicine staff within seventy-two (72) hours.

NOTE: If the inmate informs the Corrections Medicine staff of a positive PPD history, the inmate will be given a chest x-ray instead of the PPD.

- **c.** RPR (blood test for syphilis)
- **d.** STD screening (urine collection for GC and Chlamydia).
- 3. An inmate suspected of being infected with HIV, Hepatitis B or C, etc. does not need to be isolated for medical reasons unless the inmate has open draining lesions, is not maintaining appropriate personal hygiene or is not in compliance with the Justice Services' policy related to sexual conduct. Please refer to Clinical practice Guidelines for Methicillin –Resistant Staphylococcus Aureus for detailed information on caring for these inmates.
- 4. Medication which is specifically prescribed for a contagious disease cannot be refused by an inmate. (See Policy #1312 Medication Distribution) If the inmate does refuse the medication, the Corrections Medicine staff has the authority to have the inmate reclassified to a medical isolation cell or have the inmate isolated until he/she complies with the medical treatment.

5. Only the Corrections Medicine staff has the authority to admit or release an inmate to or from a medical isolation cell. The Corrections Medicine staff will inform the Unit Manager and/or

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Watch Commander of any inmate who needs to be placed in isolation due to medical concerns.

- 6. Signs will be placed outside of the isolation cell indicating the type of isolation required and the precautions to be taken. The following types of precautions will be observed:
 - **a.** The inmate will be placed in a negative pressure room, if respiratory isolation is indicated
 - **b.** Non-essential staff will be restricted from entering the room, except in emergency situations.
 - c. All staff entering the room will use appropriate "barrier precautions", such as those listed below, to prevent skin or mucous membrane exposure to blood, other body fluid secretions or excretions and environmental surfaces which may be soiled:
 - (1) Face shields
 - (2) Surgical masks
 - (3) Eye protection (goggles)
 - (4) Gloves
 - (5) Gowns.

NOTE: Corrections Officers in the Infirmary will be informed by the Corrections Medicine staff of the isolation status of the inmate.

- **d.** If significant amounts of blood, other body fluids, vomit or feces are present in the environment, shoe coverings may be needed.
- 7. The Corrections and Corrections Medicine staff will take all "standard precautions" when dealing with a contagious inmate and/or contaminated item(s).

- **a.** Hand washing with soap and water, in conjunction with clean towels or sanitizing wipes/gel. This will be done prior to entering and after departing the cell.
- **b.** Hand washing/sanitizing will be done immediately after the removal of gloves or other personal protective equipment.
- **c.** Any other skin exposure will be washed with soap and water as soon as possible.
- d. Mucous membranes will be flushed with water as soon as possible following contact of these body areas with blood, other body fluids or other potentially infectious materials.
- e. Contaminated needles and other sharps will not be bent, recapped or sheared. All contaminated needles and sharps will be placed in a bio-hazard sharps container and disposed of according to Policy #706, Liquid and Solid Waste Disposal.
- f. Contaminated laundry will be handled as little as possible, with a minimum of agitation. The laundry will be placed in an appropriate bag, (i.e., red biohazard, clear plastic) tagged at the location where it was used. The laundry will then be moved immediately to the Infirmary soiled Linen room and placed in the appropriate container. (See Policy #1103 Contaminated Laundry)]
- g. Contaminated trash will be placed in a red bio-hazard bag and disposed of according to Policy #706, Liquid and Solid Waste Disposal.
- **8.** Only disposable cups, plates and utensils will be used when feeding inmates who are considered contagious.
- 9. The medical isolation cell and/or any other cell used by a contagious inmate will be cleaned and disinfected with the appropriate disinfectant as necessary and within 24 hours after the inmate has been reassigned to a different cell and/or housing unit.

NOTE: The person cleaning the cell will wear a mask and gloves while cleaning the cell. The cell will be air dried before being used to house another inmate.

10. All supplies, including mattresses and pillows used by the inmate will be cleaned and decontaminated with the appropriate

disinfectant (Centra Plus 256) immediately after use by a contaminated inmate.

The mattresses will be inspected for any cracks in the plastic cover, and if noted will be thrown into the trash and replaced. (Mattresses do not need to be placed into the biohazard containers **unless saturated** with blood, body fluids or other drainage.)

- 11. The Corrections Medicine staff will be notified by the appropriate Corrections supervisor when an inmate under their care is being released or transferred to another facility. (See Policy #1301 Medical Care/Services)
- 12. The Corrections Medicine staff will advise and/or request assistance from the St. Louis County Communicable Disease Control, when identifying an inmate(s) with a communicable disease. The St. Louis County Communicable Disease Control office will then track the inmate upon his/her release.
- 13. The Corrections Case Managers will assist the Corrections Medicine staff in identifying and locating inmates who have been released and/or transferred and have had exposure to the source of a contagious disease. The Corrections Medicine staff will notify these inmates of the need for follow up care.

B. Epidemics

- 1. If an epidemic occurs in the Justice Center among the inmates, the following housing assignments may be used for infected inmates:
 - **a.** Four (4) isolation cells in the Infirmary
 - **b.** Twenty-three (23) cells in the Infirmary, other than the isolation cells
 - **c.** Six (6) special disciplinary cells on the 8th floor
 - **d.** Various sub-unit housing on the 8th floor
 - **e.** Forty-eight (48) cells may be used in a single housing unit on floors 4-7.
- 2. Corrections staff and Corrections Medicine staff will follow the instructions as in Section A 4 13 of these procedures.